Declaration and Power of Attorney Under Patent Cooperation Treaty 35 USC §371(c)(4)

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint-inventor (if plural inventors are named below) of the invention entitled: HEAT TRANSFER COVER FILMS

As a below named inventor, I hereby declare that:

my residence, post office address and citizenship are as stated below next to my name; that

described and claimed in internal and as amended on understand and for which I solici	(if any), (mber . the sp	PCT/JE ecification	90/00909 filed and claims of wh	July 1: nich I have	reviewe	d and	
I acknowledge my duty to disapplication in accordance with Till inventor's certificate on this inventory international application by my international application by my	tle 37, Code of Feder trion has been filed it	al Reg n any o	gulations, country f	§1.56(a), and that a preign to the United	no application States of A	n for par	tent or	
Japanese Patent A	Applications							
180471/1989 1	filed on July	14,	1989	140011/1990	filed o	n May	31,	1990
180472/1989 1	filed on July	14,				-		
	filed on July							

325870/1989 filed on December 18, 1989

The priority of the above applications (if any), filed within a year prior to my international application is hereby claimed under 35 USC 119. I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the patent office:

241929/1989 filed on September 20, 1989

Roger W. Parkhurst (Reg. No. 25,177), Charles A. Wendel (Reg. No. 24,453) and/or Marc A. Rossi (Reg. No. 31,923)

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO PARKHURST, WENDEL & ROSSI, 1421 Prince Street, Suite 210, Alexandria, Virginia 22314, Telephone: (703) 739-0220.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

3	or First Inventor		Katsuyuki		OSHIMA				
			Given Name	Middle Initial	Family Name				
•4	Inventor's Si	gnature		Tra/snyuki	Spina				
	Date of Signature		T	arch /	_ 28	19	91		
	Date of Digit			Month	Day	Yes	ır .		
6	Tokyo					Japan			
	Kesidelice _	City		State or Province		Country			
7	Citizenship .	Japan							
8	Citizensinp	Post Office Address (Insert complete mailing address, including country)		c/o DAI NIPPON INSATSU KABUSHIKI KAISHA l-l, Ichigaya-Kaga-Cho l-Chome, Shinjuku-Ku, Tokyo-To, Japan					

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

3	Typewritten Full Name of	Jitsuhiko		ANDO				
_	Second Joint Inventor (if any)	Given Name	Middle Initial	Family Name				
•4	Inventor's Signature	D gits	whike	ando				
•5	Date of Signature	March		28	1991			
•	-	Month		Day	Year			
•6	Residence Tokyo			Japan	· · · · · · · · · · · · · · · · · · ·			
•7	Citizenshin Japan	State or Pro	vince	Country				
,	Citizenship Japan	C/O DAT N	ITPPON THE	TACI: KYBUCHIKI	YATCUA .			
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3	Tunawiyan Full Name of	Masanori		TORII				
,	Typewritten Full Name of Third Joint Inventor (if any)	Given Name	Middle Initial	Family Name				
	· _•		. (7)	```	: : · · ·			
•4	Inventor's Signature	y (masa	noti	oru				
•5	Date of Signature	March		28	1991			
	Tokyo	Month		Day Japan	Year			
•6	ResidenceCity	State or Pro	wince	Country				
•7	Citizenship Japan							
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	Fourth Joint Inventor (if any)	Given Name	Middle Initial	Family Name				
•4	Inventor's Signature	<u> </u>			·			
•5	Date of Signature	Month Honth		Day	Year			
•6	Residence				· · · · · · · · · · · · · · · · · · ·			
	City	State or Pro	vince	Country				
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8	Post Office Address (Insert complete mailing address, including country)							
3	Typewritten Full Name of	Given Name	Middle Initial	Family Name				
•4	Inventor's Signature	n.						
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•6	Residence							
	City	State or Pr	ovince	Country				
•7	Citizenship							
8	Post Office Address (Insert complete mailing address, including country)	{						

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.

^{*} Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.